

Navajo Nation Regional Partnership Council

**Agenda Item:** Presentation and Discussion on 2014 Regional Needs and Assets

**Supplemental Data Collection** 

**Background:** The attached document provides a brief overview of the Needs and

Assets report and a DRAFT of a work-plan for additional service to

supplement the Base Report.

**Recommendation:** Succinctly define the direction, allocation of resources, and appropriate

timeline to obtain Navajo Nation IRB approval for primary data collection.



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## Navajo Nation Regional Partnership Council Needs & Assets Report

#### **Base Report**

The contracted vendor will collect and report on data from a vast array of national, state, and local resources, the Base Report will include information about the current status of, strengths in, and service gaps in the six goal areas: 1) quality and access to early care and education, 2) health, 3) professional development of early care teachers and workers, 4) family support, 5) public awareness, and 6) service coordination among early childhood programs and services.

The Base Report will describe the characteristics of the population of young children and their families in the region, identify the nature and extent of regional assets that support young children and their families, identify and specify what the region needs to successfully support young children and their families, discuss what resources may be needed to address the needs, and provide data that will serve as a baseline for the evaluation of later progress.

In order to successfully produce this snapshot, it may be necessary to speak with the Navajo Nation Regional Partnership Council members, other key informants from the region, and members of the target community (young children and their families) to gain a complete understanding of the distinctive character, strengths, and needs of the region.

#### **Supplement to the Base Report**

To supplement and enhance the Base Report, the Navajo Nation Regional Partnership Council may contract for additional data collection in Navajo Nation, work with a consultant to create community profiles, maps or briefs on specific topics in the larger report, or engage facilitation services to better utilize the information in the report. All additional work must compliment and coordinate with the Base Report.

First Things First honors Navajo Nation's ownership of data and recognizes communication is necessary with Navajo Nation Human and Research Review Board to determine what process/protocol is needed to obtain data. First Things First will request consideration of approval from the Navajo Nation Human and Research Review Board for all new data collection (primary data collection) for the purpose of this report before any data collection activities or preparations. For already existing data (secondary data), First Things First will follow any security and data release procedures of the respective agency (for example, IHS or WIC) and submit a draft of the final report containing those data to the Navajo Nation Human and Research Review Board before public release.

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### Work-plan for Additional Service to Supplement the Base Report

The supplemental work previously identified by the Navajo Nation Regional Partnership Council unites into six components, Health, Early Education, Professional Development, Family Support, Service Coordination, and Public Awareness. Identified key stakeholders (leadership and staff) and parent/family/caregivers will be interviewed; agencies currently holding other data will be approached to identify processes needed to incorporate that data into the report (for example, WIC and IHS).

Additi	onal data to supplement the Base Report – Key Stakeholders and Parent/Family/Caregiver	Approvals Needed from
Interviews		Authorizing Agencies via
		Resolutions
5. 6. 7. 8. 9.	What is the evidence of effects of historical trauma on young Navajo children and their families? What are parents' understanding and perceptions of how to fully access the health care system? Do parents understand the basic principles of child health and development and their health care implications? What are the incidence, prevalence, and nature of behavioral health issues in Navajo young children? What are the role and services provided by the Division of Social Services on Navajo Nation? What is the incidence of childhood obesity in Navajo children living in reservation communities? What are the implications of a regional "food desert" in extremely rural communities on the obesity rates of young children? Where do families in "food deserts" purchase their food, and what types of food do they purchase? Do parents believe they are getting the best care available? [Parents beliefs about the quality of the health care they are receiving] What are the incidence, prevalence, and nature of behavioral health issues in Navajo young	1. Service Unit Health Boards (Tuba City, Kayenta, Chinle, Winslow, Fort Defiance, Red Mesa) 2. Chapter Houses 3. Agency Councils 4. Navajo Nation WIC 5. Navajo Nation IHS
11.	children? What services are available for 0-5 y/olds with disabilities? What are the gaps & barriers to service?	

# **FIRST THINGS FIRST**

		<u>www.aziti.gov</u>
12.	How many and what percent of children 2-4 years old are at a healthy weight, obese, overweight, or underweight?	
13.	How many and what percent of children who receive pre-school special education exit to regular education in kindergarten?	
14.	How many and what percent of children receive at least six well-child visits in the first 15 months of life?	
15.	How many and what percent of children aged 5 have untreated tooth decay?	
Early I	Education	1. Navajo Head Start
1.	A map of the funding streams for young children and families that come into Navajo Nation from federal, state and philanthropic sources.  What are the current issues related to Head Start quality, curriculum, access, and stability?  What is the direction and planning process of Navajo Nation Child Care Development Fund? Are there new directions?  What is the perspective of Head Start and CCDF staff of childcare on the reservation?  What is the impact of lack of childcare options for families across Navajo Nation?  What are parents' perceptions of quality of childcare?  What is the nature of parents' and children's participation in childcare?  What is the family/parent perspective on childcare on Navajo Nation?	<ol> <li>Department of Diné         Education (DODE) Board</li> <li>Child Care Development         Fund (CCDF)</li> <li>K-12 School Boards with         Pre-K classrooms</li> <li>Chapter Houses</li> <li>Agency Councils</li> <li>Navajo Nation Quality First         programs</li> </ol>
10	. How much of their income are families spending on high quality early care and education?	
Profes	ssional Development	1. Navajo Head Start
2.	What does the current professional development process and content look like for childcare workers on Navajo Nation?  How does this compare to the recommendations of National Association of the Education of Young Children?  What other professional development may be required?	<ol> <li>DODE Board</li> <li>CCDF</li> <li>K-12 School Boards w/Pre-K</li> <li>Chapter Houses</li> <li>Agency Councils</li> </ol>
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Family	y Support	1. K-12 School Boards with
2. 3. 4.	What skills do young children need to be successful in kindergarten?  Are the Early Childhood Education programs (HS, preschools, childcare) preparing young Navajo children for successful entry into kindergarten? If not, what are the areas that need to be addressed?  What is the waiting list for foster and adoptive children?  What is the number of children in boarding schools?  How many and what percent of parents feel confident and competent to support their young children's' safety, health and well-being?	Pre-K classrooms  2. Navajo Head Start  3. DODE Board  4. CCDF  5. Division of Social Services  6. Chapter Houses  7. Agency Councils  8. Service Unit Health Boards  9. Chapter Houses  10. Agency Councils
1. 2.	What are areas of duplication of information and services? What information can be shared across divisions, departments, programs, and services? What are the retention/vacancy rates for professionals including physicians, nurses, dietitians, physical/speech/occupational therapists, mental health workers?	<ol> <li>Navajo Head Start</li> <li>DODE Board</li> <li>CCDF</li> <li>K-12 School Boards with Pre-K classrooms</li> <li>Chapter Houses</li> <li>Agency Councils</li> <li>Service Unit Health Boards</li> </ol>
	First Things First has many billboards and advertisements advocating/emphasizing, early care and education, what can we do to tell/disseminate to parents basic strategies for parenting?	<ol> <li>Navajo Head Start</li> <li>DODE Board</li> <li>CCDF</li> <li>K-12 School Boards with Pre-K classrooms</li> <li>Chapter Houses</li> <li>Agency Councils</li> <li>Service Unit Health Boards</li> </ol>